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Certificate of Facsimile Transmission

I hereby certify that the attached RCE Transmittal (2 pages); Response to the Final Office Action dated December 21, 2005 (11 pages); and PTO Form 2038 authorizing credit card payment (1 page) are being facsimile transmitted to the U.S. Patent and Trademark Office (fax No. (571) 273-8300) on the date

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5032744622

Date: March 21, 2006

PATENT APPLICATION Do. No. 5038-140 Intel Docket No. P12512

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In repatent application of:

Lawrence A. Booth, Jr. and Daniel Seligson

Serial No.

10/037,437

Filed:

December 31, 2001

For:

ENERGY SENSING LIGHT EMITTING DIODE DISPLAY

Examiner:

Nelson, Alecia Diane

Group Art Unit: 2675

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

MAIL STOP RCE Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the aboveidentified application.

1.	Submission	required	under 37	CF.R.	§	1.1 J	4
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a. Previously submitted:		
Consider the amendment(s) reply on	v under 37 C.F.R. §1.116 pr	reviously filed
Consider the arguments in the Apon	ppeal Brief or Reply Brief p	previously filed
Other:	03/22/2006 TL0111	08888811 10837437
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Application No. 10/037,437

Docket No. 5038-140

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	b. 🛛	Enclosed is:		
2.	2. Miscellaneous			
		Suspension of action on the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; fee under 37 C.F.R. § 1.17(i) required).		
		Other:		
3.	Fees:	(Note: The RCE fee under 37 C.F.R. §1.17(c) is required by 37 C.F.R. §1.114 when the RCE is filed)		
	\boxtimes	RCE fee required under 37 C.F.R. § 1.17(e)		
/I -	-5	\$395 small entity \$790 large entity		
(Large enti	ツノ			

(Dange onney)	CLAIM	S AS AME	NDED		
For:	Number After Amendment	Previous Number	Extra	Rate	Additional Fee
Total Claims	45	-42*	3	x \$50 =	\$150
Independent Claims	4	-3**	1	x \$200 =	\$200
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT					\$400

- PTO Form 2038 authorizing credit card payment is attached.
- Any deficiency or overpayment should be charged or credited to deposit account number 13-1703. A duplicate copy of this sheet is enclosed.

Customer No. 32231

Respectfully submitted,

MARGER JOHNSON & McCOLLOM, P.C.

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